

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas G Woolston

Title: CONSIGNMENT NODES

Docket No.: 2043.566US2
Filed: November 7, 1995
Examiner: Unknown
Customer No.: 49845

Serial No.: 08/554,704
Group Art Unit: Unknown
Confirmation No.: 8269

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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☒ Authorization to Act in a Representative Capacity (1 pg)

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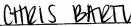
Customer No.: 49845

By: 

Andre L. Marais


Reg. No. 48,095

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being filed using the USPTO's electronic filing system EFS-Web, and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 16 day of May, 2008.


Name


Signature

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Thomas G. Woolston					
Application No. 08/554,704					
Filed: November 7, 1995					
Title: CONSIGNMENT NODES					
Attorney Docket No. 2043.566US2	Art Unit: 2761				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. (Note: pursuant to 37 CFR 10.57(c), a practitioner cannot authorize other registered practitioners to conduct interviews without consent of the client after full disclosure.) Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Name</th> <th style="width: 40%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td> Abraham Hershkovitz Hershkovitz & Associates, LLC 2845 Duke Street Alexandria, VA 22314 </td> <td style="text-align: center;">45,294</td> </tr> </tbody> </table>		Name	Registration Number	Abraham Hershkovitz Hershkovitz & Associates, LLC 2845 Duke Street Alexandria, VA 22314	45,294
Name	Registration Number				
Abraham Hershkovitz Hershkovitz & Associates, LLC 2845 Duke Street Alexandria, VA 22314	45,294				
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>					
 SIGNATURE of Practitioner of Record					
Signature	Date 05/15/2008				
Name	Registration No., if applicable 48,095				
Telephone					
(408) 278-4042					

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